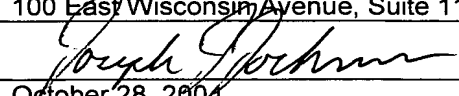


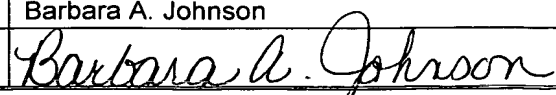
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Please type a plus sign (+) inside this box [+]		Patent and Trademark Office: U.S. Department of Commerce	
0001/PTO	U.S. Department of Commerce	Application Number	10/614,729
Rev. 10/95	Patent and Trademark Office	Filing Date	07/07/2003
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		First Named Inventor	Jonathan A. Darby
		Group Art Unit	3681
		Examiner Name	Saul Rodriguez
Total Number of pages in this Submission		7	Attorney Docket Number
			248-00283

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After final <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement/PTO-1449 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37.1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Checklist and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> After Allowance Communication To Group <input type="checkbox"/> Appeal Communication to Board Of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (Please identify below) <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return receipt postcard</div>
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	Joseph J. Jochman, Reg. No. 25,058 ANDRUS, SCEALES, STARKE & SAWALL, LLP 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202
Signature	
Date	October 28, 2004

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">October 28, 2004</div>	
Typed or printed name	Barbara A. Johnson
Signature	
Date	10/28/2004



Approved for use through 9/30/98
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PTO/SB/17 (10/97)		COMPLETE IF KNOWN		
FEE TRANSMITTAL		Application Number	10/614,729	
		Filing Date	07/07/2003	
		First Named Inventor	Jonathan A. Darby	
		Group Art Unit	3681	
		Examiner Name	Saul Rodriguez	
Total Amount of Payment (\$)		0	Attorney Docket Number	248-00283
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)		
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number 01.2000 Deposit Account Name Andrus, Sceales, Starke & Sawall, LLP <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee set in 37 CFR 1.18 at the Mailing Of the Notice of Allowance, 37 CFR 1.311(b)		2. Additional Fees Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid		
3. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		105 130 205 65 Surcharge-late filing fee or oath _____ 127 50 227 25 Surcharge-late provisional filing fee _____ or cover sheet _____ 139 130 139 130 Non-English specification _____ 147 2,520 147 2,520 For filing a request for reexamination _____ 112 920* 112 920* Requesting publication of SIR prior to _____ Examiner action _____ 113 1,840* 113 1,840* Requesting publication of SIR after _____ Examiner action _____ 115 110 215 55 Extension for response within first _____ month _____ 116 400 216 200 Extension for response within second _____ month _____ 117 950 217 475 Extension for response within third _____ month _____ 118 1,510 218 755 Extension for response within fourth _____ month _____ 128 2,060 228 1,030 Extension for response within fifth _____ month _____ 119 310 219 155 Notice of appeal _____ 120 310 220 155 Filing a brief in support of an appeal _____ 121 270 221 135 Request for oral hearing _____ 138 1,510 138 1,510 Petition to institute a public use _____ proceeding _____ 140 110 240 55 Petition to revive unavoidably _____ abandoned application _____ 141 1,320 241 660 Petition to revive unintentionally _____ abandoned application _____ 142 1,320 242 660 Utility issue fee (or reissue) _____ 143 450 243 225 Design issue fee _____ 144 670 244 335 Plant issue fee _____ 122 130 122 130 Petitions to the Commissioner _____ 123 50 123 50 Petitions related to provisional _____ applications _____ 126 240 126 240 Submission of Information Disclosure _____ Statement _____ 581 40 581 40 Recording each patent assignment per _____ property (times number of _____ properties _____ 146 790 246 395 Filing a submission after final rejection _____ (37 CFR 1.129(a)) _____ 149 790 249 395 For each additional invention to be _____ examined (37 CFR 1.129(b)) _____ Other fee (specify) _____ Other fee (specify) _____		
FEE CALCULATION (fees effective 10/01/97)		SUBTOTAL (3) (\$)		
1. Filing Fee Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Description		SUBTOTAL (3) (\$)		
101 690 201 345 Utility filing fee _____ 106 310 206 155 Design filing fee _____ 107 480 207 240 Plant filing fee _____ 108 690 208 345 Reissue filing fee _____ 114 150 214 75 Provisional filing fee _____ SUBTOTAL (1) (\$)		SUBTOTAL (3) (\$)		
2. Claims Extra Fee from below Fee Paid Total claims -20= X = _____ Independent - 3= X = _____ Claims Multiple Dependent X = _____ Claims Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Description		SUBTOTAL (3) (\$)		
103 18 203 9 Claims in excess of 20 _____ 102 78 202 39 Independent claims in _____ excess of 3 _____ 104 270 204 135 Multiple dependent claim _____ 109 82 209 41 Reissue independent _____ claims over original _____ patent _____ 110 22 210 11 Reissue claims in excess of _____ 20 and over original patent _____ SUBTOTAL (2) (\$)		SUBTOTAL (3) (\$)		
SUBMITTED BY		COMPLETE (if applicable)		
Type or Printed name	Joseph J. Jochman Andrus, Sceales, Starke & Sawall, LLP	Registration Number	25,058	
Signature	<i>Joseph Jochman</i>	Date	10/28/2004	
		Deposit Account User ID		

Appln. No. 10/614,729
Amdt dated: October 28, 2004
Reply to Office Action of July 28, 2004



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Of:

JONATHAN A. DARBY ET AL

Application No.: 10/614,729

Filed: 07/07/2003

Group Art Unit: 3681

Examiner: Saul Rodriguez

NO-BACK DEVICE

AMENDMENT

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This paper is in response to the Office Action mailed July 28, 2004.

Amendments to the Claims are reflected on page 2 of this paper.

Amendments to the Drawings begin on page 3 of this paper and include an attached replacement sheet.

Remarks begin on page 6 of this paper.